

PUBLIC HEALTH SEATTLE & KING COUNTY

INSTRUCTIONS FOR PREPARING AN APPEAL TO THE HEALTH OFFICER VIA THE KING COUNTY SEWAGE REVIEW COMMITTEE (SRC) PROCESS

NOTE: Applications for appeal shall be filed with the health officer not later than 5 p.m. (5:00 p.m.) of the sixtieth (60th) calendar day following the date of the decision or order that is the subject of the appeal. Applications received later than the above time period will be returned to the applicant as unacceptable. (Reference: The Code of the King County Board of Health, Title 13, Chapter 13.12)

In order to make a timely and appropriate review of your request for reconsideration, the following documents are the minimum which should be submitted. Submit **five (5)** complete sets of the application package, including copies of all pertinent exhibits with each set.

☐ **All documents and support materials must be legible.**

- ☐ 1. An explanation of why application of King County Board of Health code will cause undue and/or unnecessary hardship;
- ☐ 2. An explanation of why waiver of a portion of the code will not jeopardize public health and safety or interfere with the rights of others in the comfortable enjoyment of their life or property. Provide technical justification for each specific waiver request.
- ☐ 3. Reference the specific chapter and section (from the Code of the King County Board of Health Title 13) you are requesting be waived or modified. If the appeal involves a formal policy & procedure, reference the document number.
- ☐ 4. Photocopies of all documentation involving the formal decision or order issued by the District Health and Environmental Investigator. With each application set, include copies of disapproved plot plans and all specifications associated with the proposed/existing sewage system.
- ☐ 5. Any additional evidence you may wish to include demonstrating why waiver or modification of the code will not result in an inadequate system. This may consist of geologist's reports, engineer's reports, manufacturer's literature, sewer district letters, photographs, or anything else which has a bearing on the application and will provide information to the Committee.
- ☐ 6. A **\$1,160.00** application fee;
- ☐ 7. Attach an accurate route and direction map for locating the subject property. (If the appeal involves property with an existing structure, indicate the color of building or mobile home.)
- ☐ 8. Notify all owners of property located within 300 feet of the subject property or the owners of the nearest 15 properties whichever is greater, concerning the nature of your appeal. (See further instructions on the attached form.)
- ☐ 9. Complete this checklist and submit it with your application to:

**Attn: King County Sewage Review Committee
Eastgate Public Health Center
14350 SE Eastgate Way
Bellevue, WA 98007-6458**

Within forty days, following receipt of your completed application, a meeting of the Committee will be scheduled to consider your request. In order that you may be notified of the date, times, and location of the meeting, please provide an address and telephone number where you may be contacted during working hours. If applicable provide a fax number, e-mail address, and the names and mailing addresses of any additional persons to be notified of the future meeting.